

MULTIPLE DEPENDENT FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						CLAIM	SERIAL NO. 10/561183	FILING DATE				
CLAIMS												
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1					51					
2		1				52						
3		1				53						
4		1				54						
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45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
TOTAL IND.	2											
TOTAL DEP.	13											
TOTAL CLAIMS	15											